

Minutes of the meeting of the Quality and Patient Safety Committee of the Board of Directors of the Cook County Health and Hospitals System held Friday, October 18, 2019 at the hour of 10:30 A.M. at 1950 W. Polk Street, in Conference Room 5301, Chicago, Illinois.

## **I. Attendance/Call to Order**

Chair Gugenheim called the meeting to order.

Present: Chair Ada Mary Gugenheim and Directors Mike Koetting (Substitute Member) and Layla P. Suleiman Gonzalez, PhD, JD (3)

Board Chair M. Hill Hammock (ex-officio) and Patricia Merryweather (Non-Director Member)

Present

Telephonically: Director Heather M. Prendergast, MD, MS, MPH (1)

Absent: Director Mary Driscoll, RN, MPH (1)

Director Koetting, seconded by Director Suleiman Gonzalez, moved to allow Director Prendergast to telephonically participate in the meeting as a voting member. THE MOTION CARRIED UNANIMOUSLY.

Additional attendees and/or presenters were:

Debra Carey – Deputy Chief Executive Officer,  
Operations

Trevor Lewis, MD – John H. Stroger, Jr.  
Hospital of Cook County

Jeff McCutchan –General Counsel

Krzysztof Pierko, MD – John H. Stroger, Jr.  
Hospital of Cook County

Deborah Santana – Secretary to the Board  
John Jay Shannon, MD – Chief Executive  
Officer

Elizabeth Vaclavic – Associate Nurse Executive,  
Ambulatory Services

Ronald Wyatt, MD – Chief Medical Officer

## **II. Public Speakers**

Chair Gugenheim asked the Secretary to call upon the registered public speakers.

The Secretary responded that there were none present.

## **III. Report from Chief Quality Officer**

### **A. Regulatory and Accreditation Updates**

Dr. Ronald Wyatt, Chief Quality Officer, provided an update on a series of Ambulatory regulatory activities that occurred over the last year. In August 2018, the organization received a Certificate of Distinction from The Joint Commission on its Primary Care Medical Home Program. In February 2019, Title X Family Planning was recertified by the Illinois Department of Public Health (IDPH); in May 2019, IDPH recertified the School Health Program. Also, in July 2019, the Illinois Emergency Management Agency recertified the ACR Mammography Program.

### **III. Report from Chief Quality Officer (continued)**

#### **B. Metrics (Attachment #1)**

Dr. Wyatt provided an overview of the metrics. The Committee reviewed and discussed the information.

During the discussion of the metrics on Hospital Acquired Infections, Board Chair Hammock inquired regarding the goal of zero infections; he asked if information can be provided on what other hospitals set as their goals for those measures. Dr. Wyatt responded that he can provide data, but he believes that most hospitals would also set their goals at zero. Dr. John Jay Shannon, Chief Executive Officer, noted that the Committee receives an annual report from the Department of Infectious Diseases that goes into more detail on the subject; the most recent report presented in November 2018 can be re-circulated to the Committee for their information.

### **IV. Action Items**

#### **A. Proposed Amendment to the Bylaws of the John H. Stroger, Jr. Hospital of Cook County Medical Staff (Attachment #2)**

Dr. Trevor Lewis, President of the EMS of John H. Stroger, Jr. Hospital of Cook County, presented the item for the Committee's consideration.

Director Prendergast, seconded by Director Suleiman Gonzalez, moved to approve the proposed Amendment to the Bylaws of the John H. Stroger, Jr. Hospital of Cook County Medical Staff. THE MOTION CARRIED UNANIMOUSLY.

#### **B. Approve appointments and reappointments of Stroger Hospital Department Chair(s) and Division Chair(s)**

There were none presented for consideration.

#### **C. Executive Medical Staff (EMS) Committees of Provident Hospital of Cook County and John H. Stroger, Jr. Hospital of Cook County**

- i. Receive reports from EMS Presidents
- ii. Approve Medical Staff Appointments/Reappointments/Changes (Attachment #3)

Dr. Lewis presented his report. He stated that, at the recent EMS meeting, reports from Correctional Health and Nursing were received.

Dr. Valerie Hansbrough, President of the EMS of Provident Hospital of Cook County, was unable to attend the meeting.

**IV. Action Items**

**C. Executive Medical Staff (EMS) Committees of Provident Hospital of Cook County and John H. Stroger, Jr. Hospital of Cook County (continued)**

Director Suleiman Gonzalez, seconded by Director Prendergast, moved to approve the Medical Staff Appointments/Re-appointments/Changes for John H. Stroger, Jr. Hospital of Cook County. THE MOTION CARRIED UNANIMOUSLY.

Director Suleiman Gonzalez, seconded by Director Prendergast, moved to approve the Medical Staff Appointments/Re-appointments/Changes for Provident Hospital of Cook County. THE MOTION CARRIED UNANIMOUSLY.

**D. Minutes of the Quality and Patient Safety Committee Meeting, September 20, 2019**

Director Koetting, seconded by Director Suleiman Gonzalez, moved to accept the Minutes of the Quality and Patient Safety Committee Meeting of September 20, 2019. THE MOTION CARRIED UNANIMOUSLY.

**E. Any items listed under Sections IV and V**

**V. Closed Meeting Items**

- A. Medical Staff Appointments/Re-appointments/Changes**
- B. Claims, Litigation and Quality and Patient Safety Matters**
- C. Matters protected under the federal Patient Safety and Quality Improvement Act of 2005 and the Health Insurance Portability and Accountability Act of 1996**

Director Koetting, seconded by Director Suleiman Gonzalez, moved to recess the open meeting and convene into a closed meeting, pursuant to the following exceptions to the Illinois Open Meetings Act: 5 ILCS 120/2(c)(1), regarding “the appointment, employment, compensation, discipline, performance, or dismissal of specific employees of the public body or legal counsel for the public body, including hearing testimony on a complaint lodged against an employee of the public body or against legal counsel for the public body to determine its validity,” 5 ILCS 120/2(c)(11), regarding “litigation, when an action against, affecting or on behalf of the particular body has been filed and is pending before a court or administrative tribunal, or when the public body finds that an action is probable or imminent, in which case the basis for the finding shall be recorded and entered into the minutes of the closed meeting,” 5 ILCS 120/2(c)(12), regarding “the establishment of reserves or settlement of claims as provided in the Local Governmental and Governmental

Ada Mary Gugenheim, Chair

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Deborah Santana, Secretary

Requests/follow-up:

Request: A request was made for information on what other hospitals set as their goal for hospital acquired infections. Page 2

Follow-up: The most recent Report from the Department of Infectious Diseases presented to the Committee (in November 2018) will be re-circulated to the Committee for their information. Page 2

Cook County Health and Hospitals System  
Quality and Patient Safety Committee Meeting  
October 18, 2019

ATTACHMENT #1

# QPS Quality Dashboard



October 18, 2019



COOK COUNTY  
HEALTH

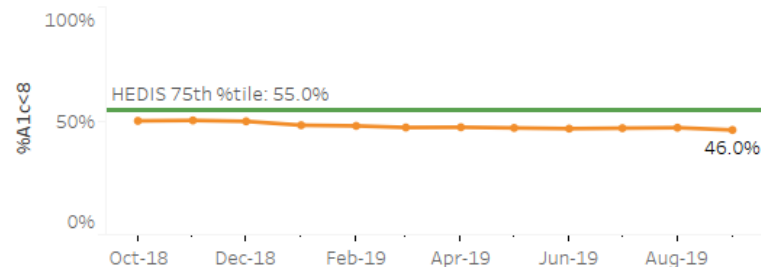


# COOK COUNTY HEALTH

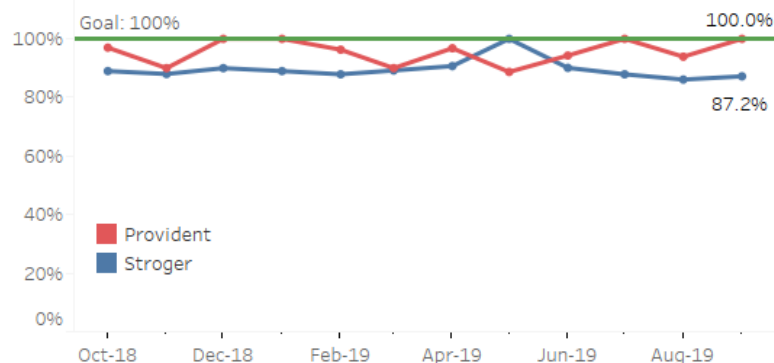
Quality Dashboard  
October 18, 2019

## Health Outcomes

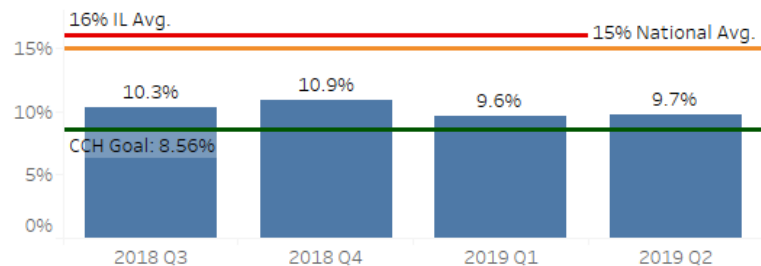
### HEDIS - Diabetes Management: HbA1c < 8%



### Core Measure - Venous Thromboembolism (VTE) Prevention

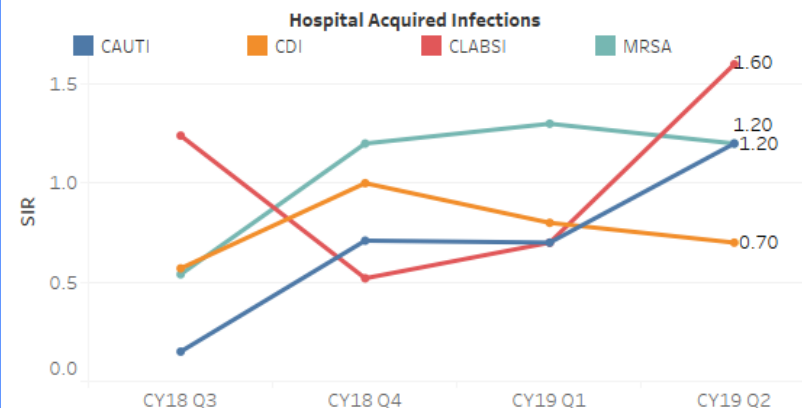
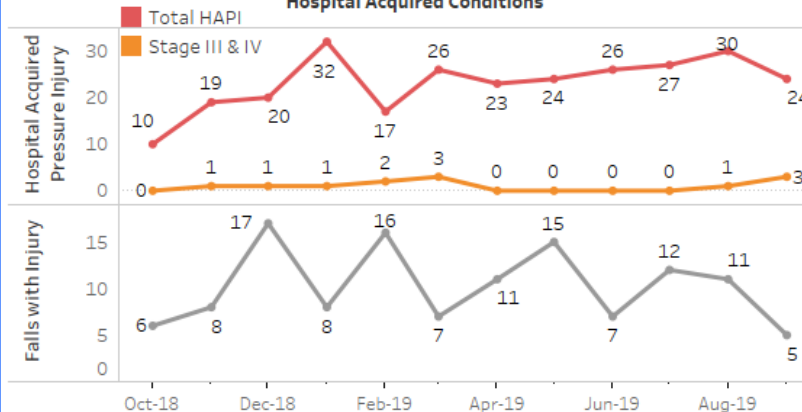


### 30 Day Readmission Rate



## Patient Safety

### Hospital Acquired Conditions

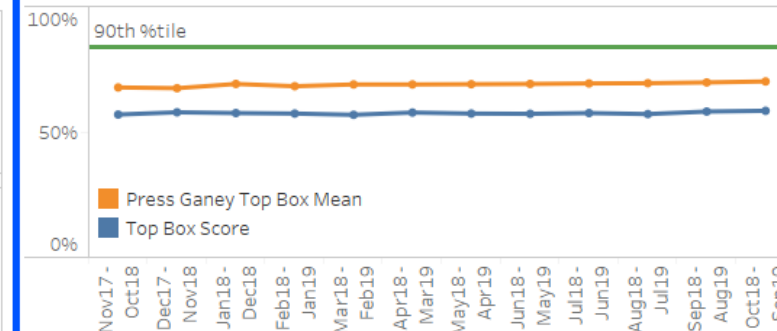


SIR (Standardized Infection Ratio) is a summary measure which compares the actual number of Healthcare Associated Infections (HAI) in a facility with the baseline data for standard population. SIR > 1.0 indicates more HAIs were observed than predicted, conversely SIR of < 1.0 indicates that fewer HAIs were observed than predicted.

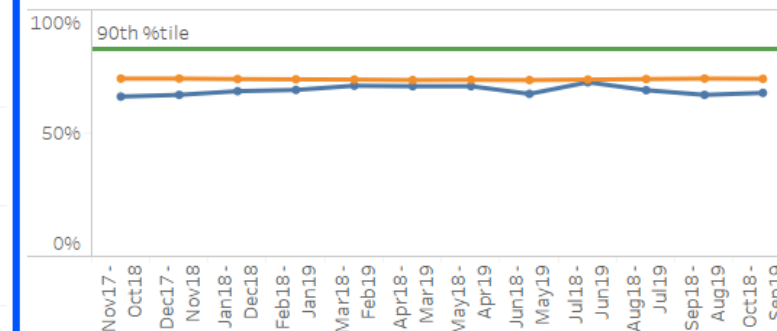
	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19
CAUTI	0	0	1	3	1	1	2	1	2	5	6	2
CDI	2	10	4	4	6	2	6	5	4	4	9	5
CLABSI	0	0	0	2	1	0	2	2	2	3	2	4
MRSA	0	0	1	0	1	0	1	0	0	2	0	0

## Utilization

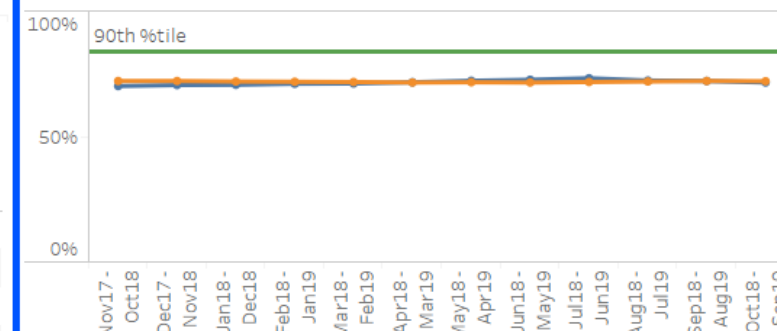
### ACHN--Overall Clinic Assessment



### Provident--Willingness to Recommend Hospital

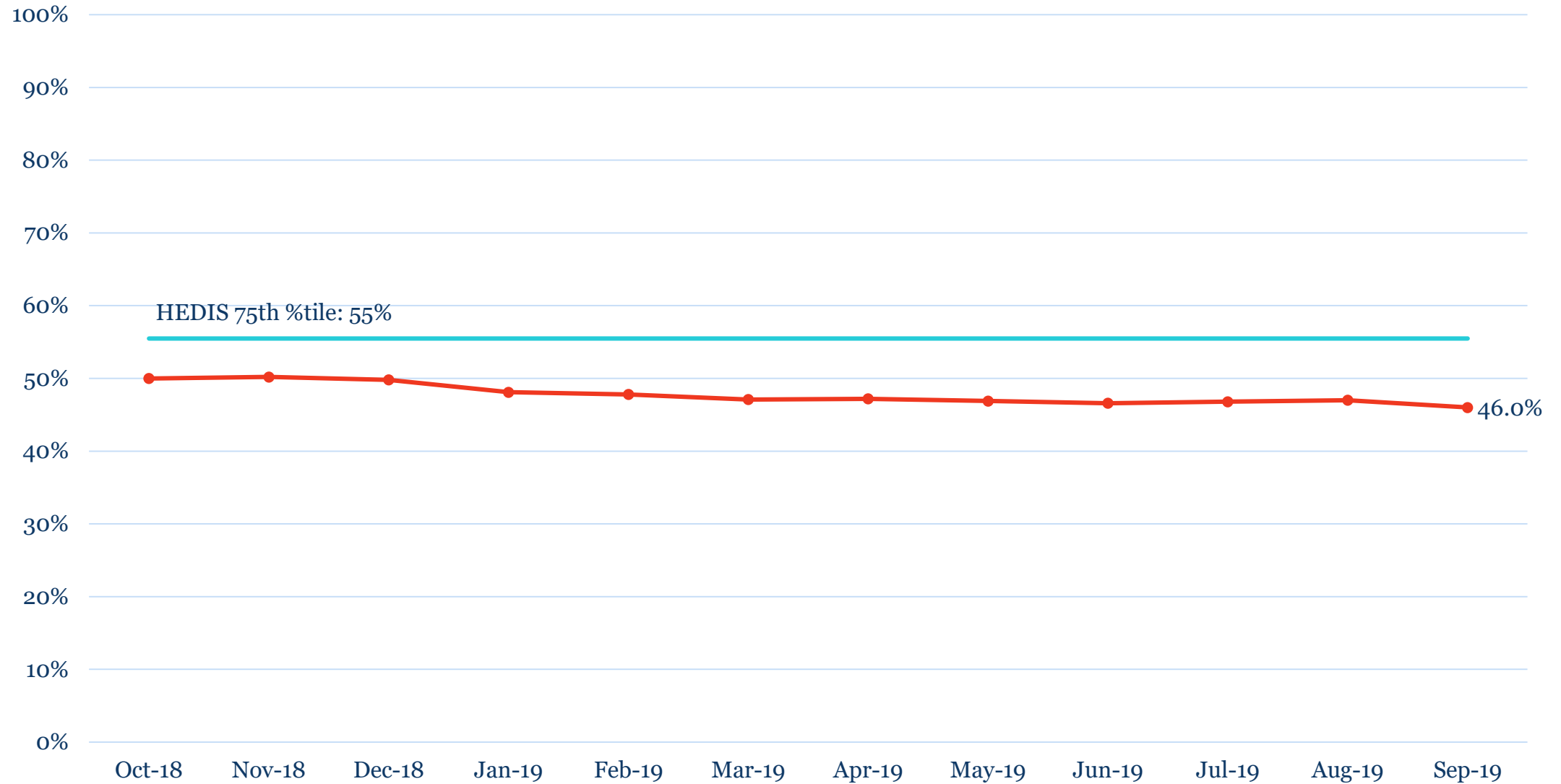


### Stroger--Willingness to Recommend Hospital



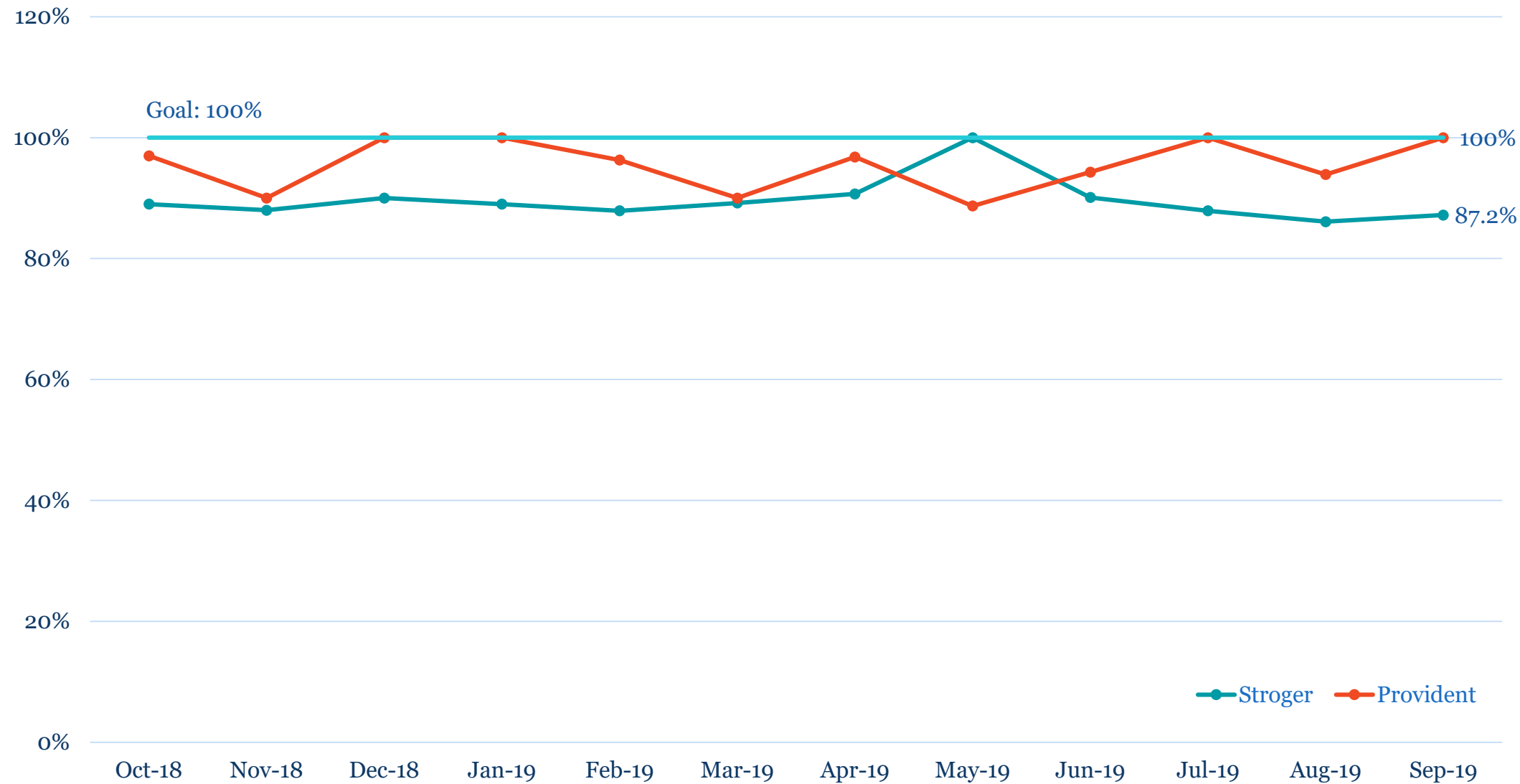


## HEDIS – Diabetes Management: HbA1c < 8%



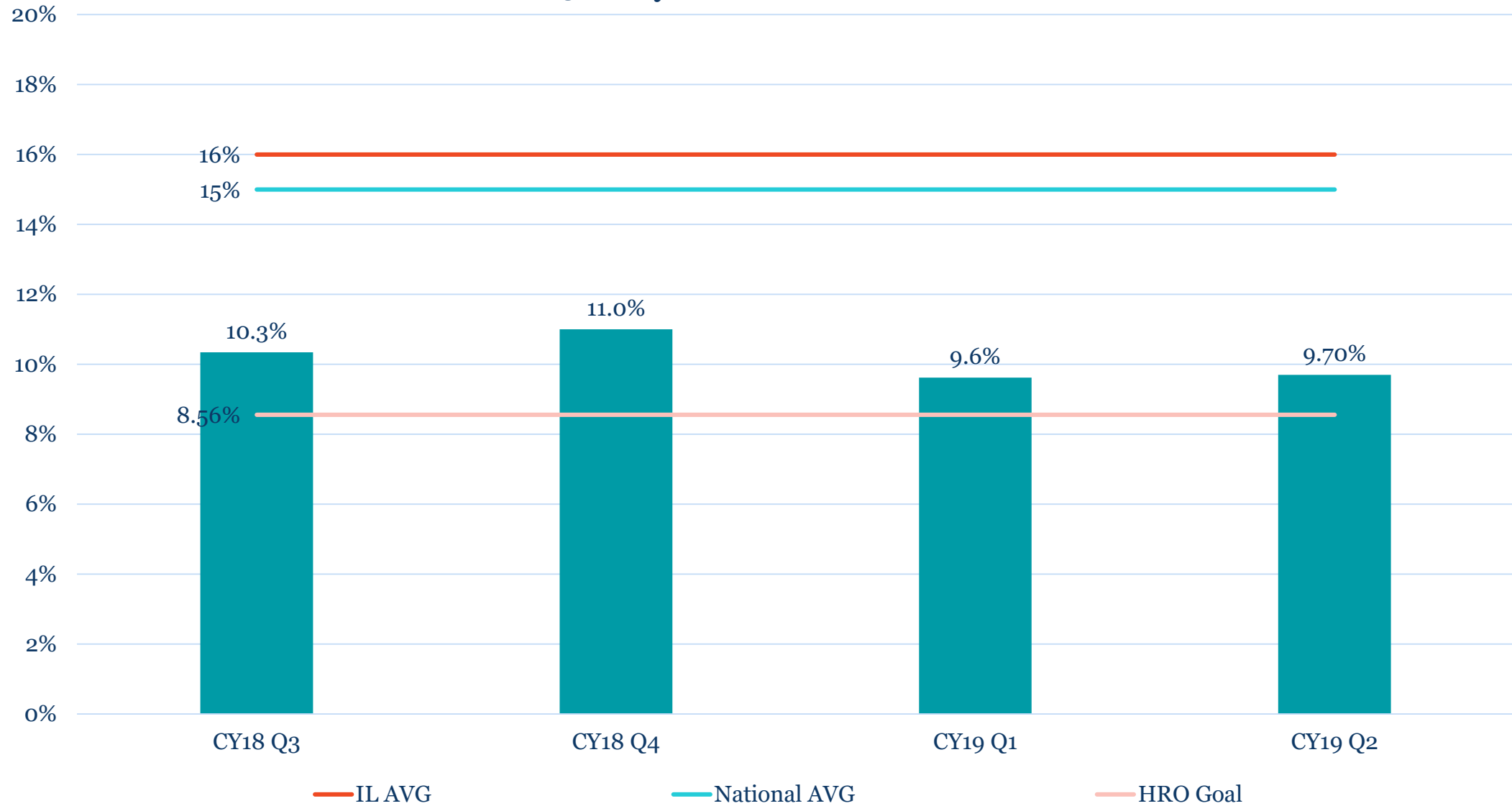
Source: Business Intelligence

# Core Measure – Venous Thromboembolism (VTE) Prevention



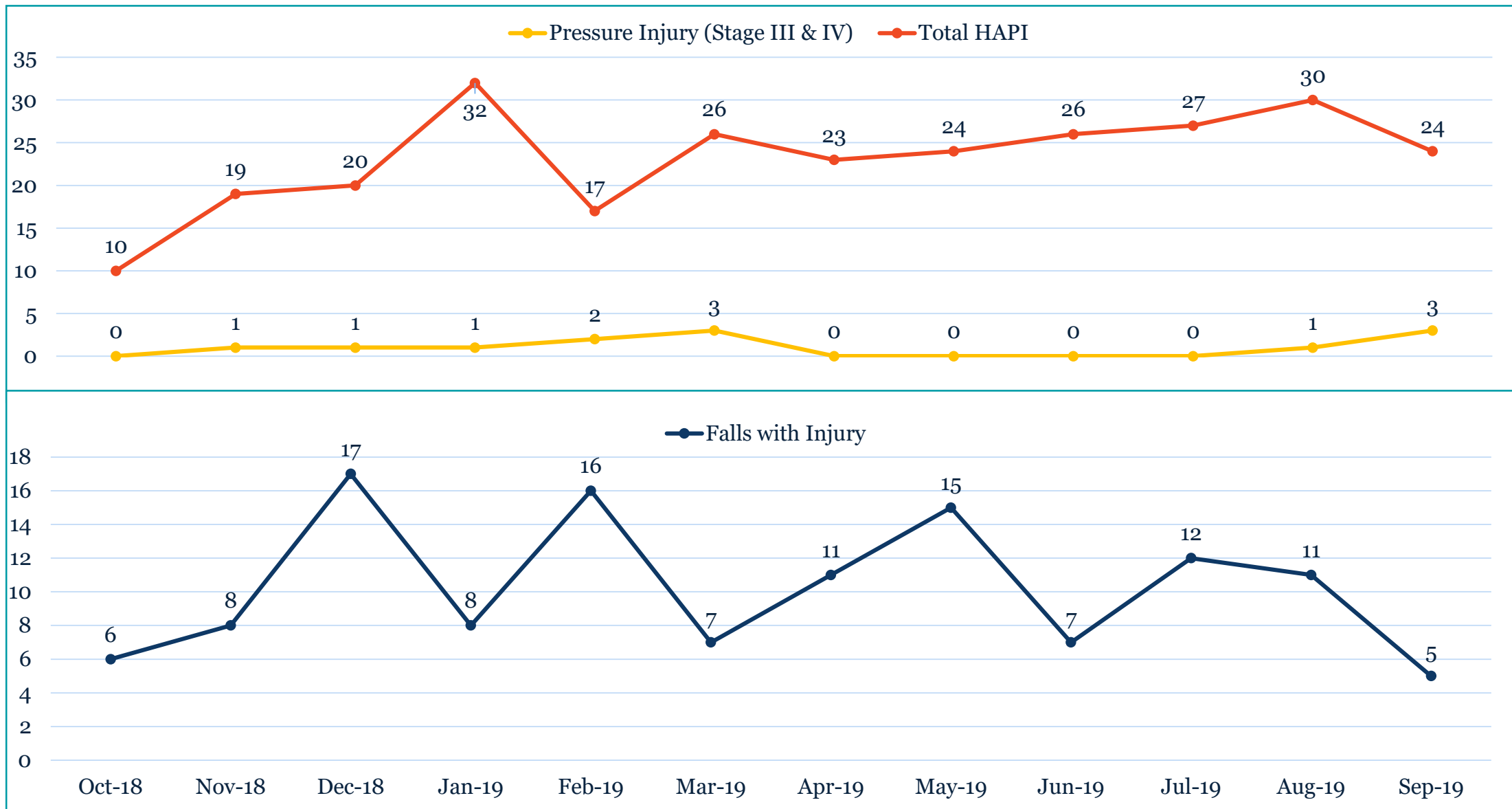
Source: Quality Dept.

## 30 Day Readmission Rate

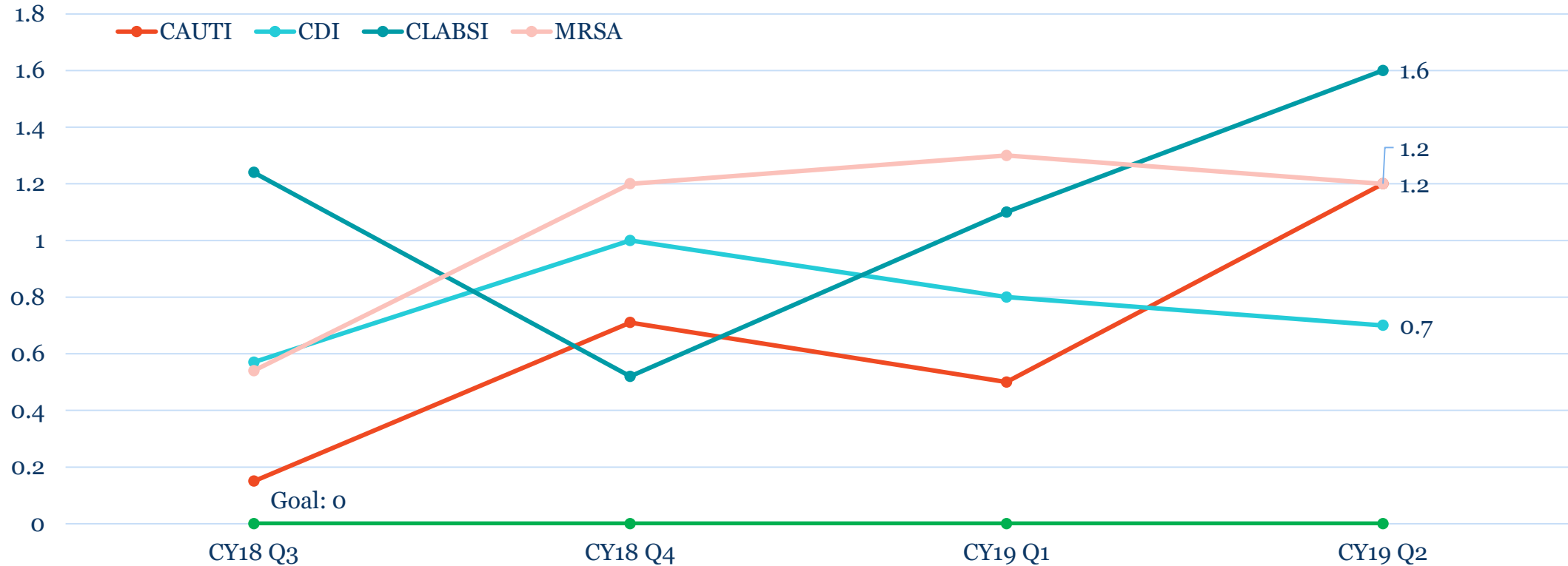


Source: Business Intelligence

## Hospital Acquired Conditions



# Hospital Acquired Infections



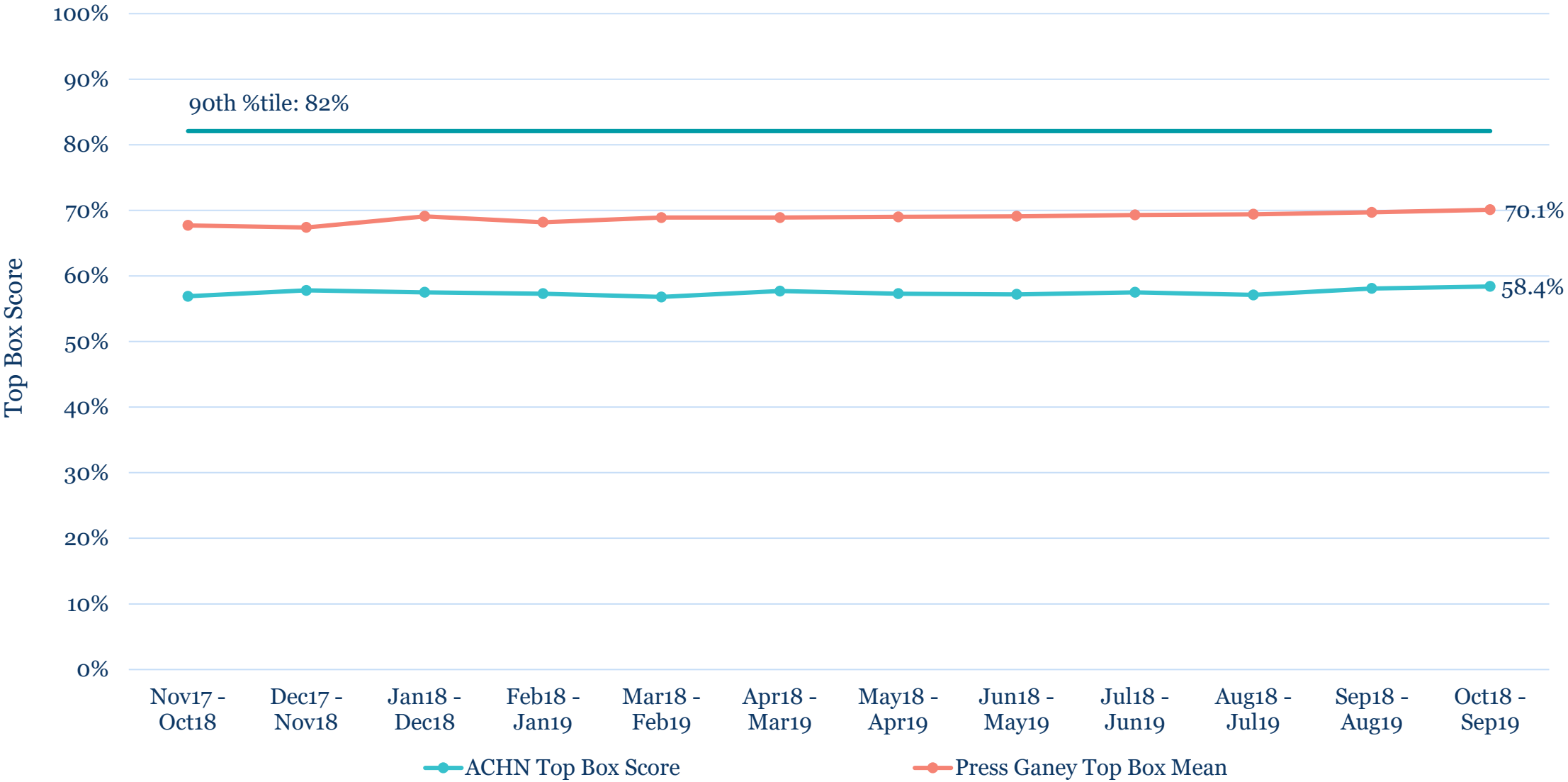
	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19
CAUTI	0	0	1	3	1	1	2*	1	2*	5	6	2
CDI	2	10	4	4	6	2	6	5	4	4	9	5
CLABSI	0	0	0	2	1	0	2*	2	2	3	2	4
MRSA	0	0	1	0	1	0	1	0	0	2	0	0

\*Amended

SIR (Standardized Infection Ratio) is a summary measure which compares the actual number of Healthcare Associated Infections (HAI) in a facility with the baseline data for standard population. SIR > 1.0 indicates more HAIs were observed than predicted, conversely SIR of < 1.0 indicates that fewer HAIs were observed than predicted.

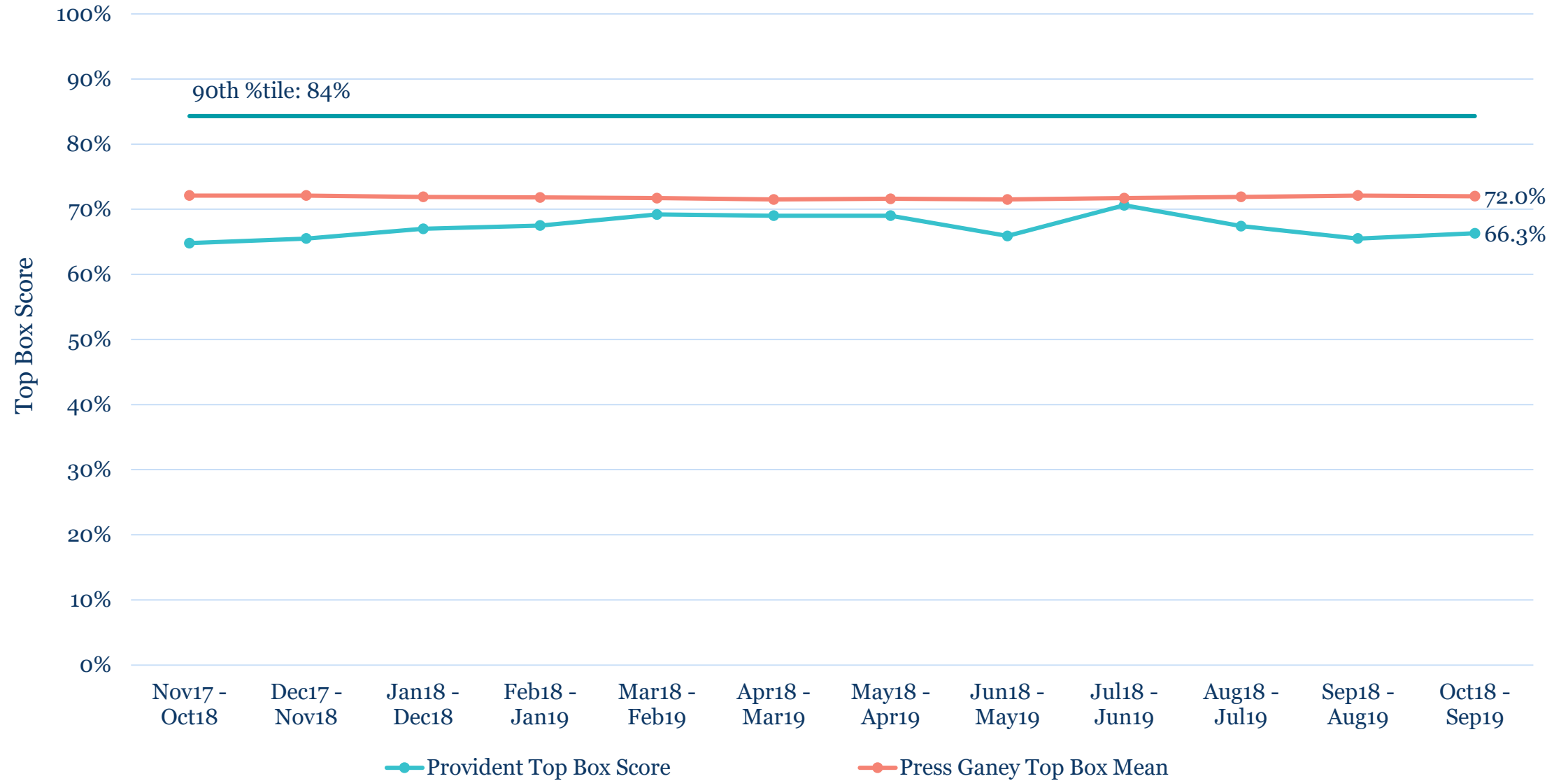
Source: Infection Control Dept.

# ACHN – Overall Clinic Assessment



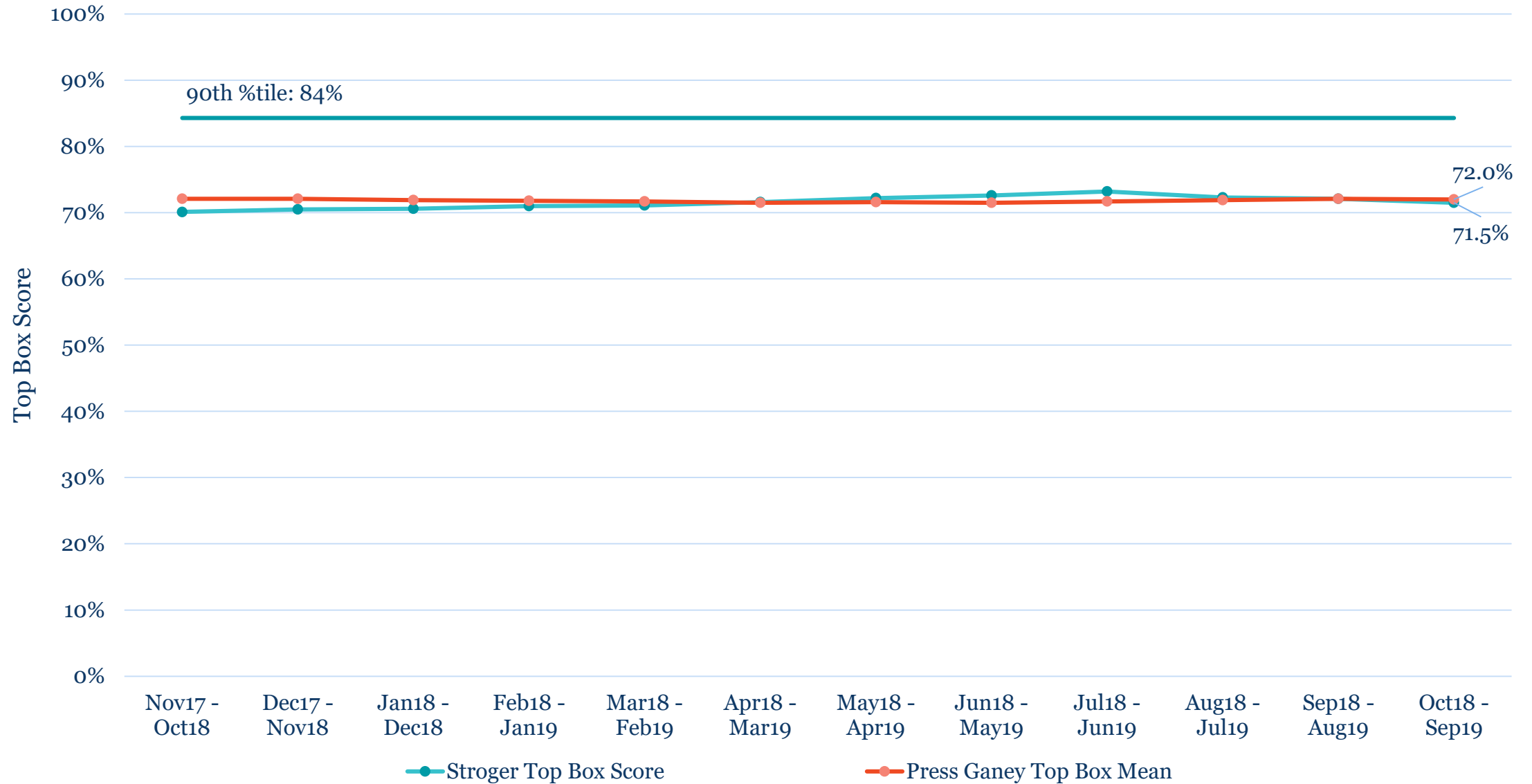
Source: Press Ganey

## Provident – Willingness to Recommend the Hospital



Source: Press Ganey

# Stroger – Willingness to Recommend the Hospital



Source: Press Ganey



QPS Measure Name	Measure Definition	Source
Diabetes Management HbA1c <8%	Adults ages 18-75 with diabetes (type 1 or type 2) where HbA1c is in control (<8.0%). Qualifying patients: - Age 18-75 years as of December 31 of current year AND -Two diabetic Outpatient/ED visits in the current year or previous year OR -One diabetic Inpatient visit in the current year or previous year OR -Prescribed insulin or hypoglycemic or antihyperglycemics in the current year or previous year	NCQA, HEDIS
Core Measure-Venous Thromboembolism (VTE) Prevention	Percentage of surgical patients aged 18 years and older undergoing procedures for which venous thromboembolism (VTE) prophylaxis is indicated, who had an order for Low Molecular Weight Heparin (LMWH), Low- Dose Unfractionated Heparin , adjusted-dose warfarin, fondaparinux or mechanical prophylaxis to be given within 24 hours prior to incision time or within 24 hours after surgery end time	CMS
Readmission Rate	The readmission measures are estimates of unplanned readmission to an acute care hospital in the 30 days after discharge from a hospitalization. Patients may have had an unplanned readmission for any reason.	CMS
Hospital Acquired Pressure Injuries	A pressure injury is localized damage to the skin and underlying soft tissue usually over a bony prominence or related to a medical or other device. Full thickness pressure injuries involve the epidermis and dermis, but also extend into deeper tissues (fat, fascia, muscle, bone, tendon, etc.)	CMS, AHRQ
Falls with Injury	A patient fall is an unplanned descent to the floor (or extension of the floor, e.g., trash can or other equipment) with injury to the patient.	TJC, NDNQI
Hospital Acquired Infections - CAUTI	Catheter-associated urinary tract infections	NHSN
Hospital Acquired Infections - CDI	Clostridium difficile intestinal infections	NHSN
Hospital Acquired Infections - CLABSI	Central line-associated bloodstream infections	NHSN
Hospital Acquired Infections - MRSA	Methicillin-resistant Staphylococcus Aureus blood infections	NHSN
Press Ganey Patient Satisfaction Top Box Score	The percentage of responses in the highest possible category for a question, section, or survey (e.g. percentage of 'Very Good,' or 'Always' responses).	Press Ganey
Press Ganey Patient Satisfaction Percentile Rank	A percentile rank tells you where your score falls in relationship to other scores. Percentile rank for any given metric in any peer group is determined by ordering all facilities' scores from highest to lowest, then each score receives a percentile rank by determining the proportion of the database that falls below that score. For example, if your percentile rank is 30, you are scoring the same as or better than 30% of the organizations you are compared to.	Press Ganey
ACHN Patient Satisfaction-Overall Assessment	Includes two questions: 1. How well the staff worked together to care for you. 2. Likelihood of your recommending our practice to others.	Press Ganey
Hospital Patient Satisfaction-Willingness to Recommend Hospital	The likelihood that a patient will recommend a hospital to family members and friends.	Press Ganey

Cook County Health and Hospitals System  
Quality and Patient Safety Committee Meeting  
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ATTACHMENT #2

## G. Telemedicine.

1) The ~~Medical Executive~~EMS Committee shall recommend the scope of telemedicine services to be permitted at the Hospital. Requests for telemedicine privileges at the Hospital will be processed through the established procedure for reviewing and granting privileges as established elsewhere in these Bylaws. Medical Staff members and ~~/or Licensed Independent Practitioners (LIPs)~~Non-Physician Providers who provide interpretive services such as official readings of images, tracings, or specimens (e.g., radiologists or pathologists) or consultations without directing patient care, through a telemedicine mechanism, must be privileged utilizing one of the following mechanisms:

a.        the Member or Non-Physician Provider~~LIP~~ ~~may be~~ fully credentialed and privileged at ~~this the~~ Hospital ~~or another System hospital~~; or

b.        the Member or Non-Physician Providers~~LIP~~ is privileged at the Hospital -using credentialing information from a distant site entity that has a written~~n~~ agreement with the Hospital and meets the following criteria:

(i)        ~~(i)~~ the distant site is a hospital participating in Medicare, ~~or an entity that~~ has a privileging and credentialing process that meets applicable TJC medical staff and governing body standards, and is TJC accredited;

(ii)        ~~(ii)~~ the Member or Non-Physician Provider~~LIP~~ ~~must be~~ privileged at the Distant Site for the services to be provided at the ~~Provident~~ Hospital and the Distant Site provides a list of current privileges; and

(iii)        ~~(iii)~~ the Hospital collects and maintains evidence of an internal review of LIP's ~~the Member's or Non-Physician Provider's~~ performance and sends to the Distant Site information that is useful to the Member's or Non-Physician Provider's~~LIP's~~ quality of care, treatment, and services for use in privileging and performance improvement, including all adverse events resulting from telemedicine services and all complaints received about the ~~Practitioner~~Member or Non-Physician Provider; and—

~~(i)(iv)~~ (iv) ~~The the~~ Member or Non-Physician Provider~~LIP~~ holds a license issued or recognized by the State of Illinois.

—2) Members ~~or LIPs~~ granted privileges to provide telemedicine services at ~~Stroger the~~ Hospital will be governed by these Bylaws ~~with the following exception~~except for any provisions addressing:

a.        —Call Coverage;

b.        Meeting Attendance; and

~~a-c.~~        —Dues .

3) Non-Physician Providers granted privileges to provide telemedicine services at the Hospital will be governed by these Bylaws as applicable and the Non-Physician Provider Policy.

Cook County Health and Hospitals System  
Quality and Patient Safety Committee Meeting  
October 18, 2019

ATTACHMENT #3



COOK COUNTY  
HEALTH



Toni Preckwinkle  
President, Cook County Board of Commissioners

John Jay Shannon, MD  
Chief Executive Officer, Cook County Health

Deb Santana  
Secretary to the Board  
Cook County Health

Date: October 16, 2019

Dear Members of the Quality and Patient Safety Committee of  
the CCH Board,

The Executive Medical Staff Committee of John H. Stroger Jr.,  
Hospital of Cook County, approved the attached list of medical  
staff action items Tuesday, October 8, 2019, for your  
consideration. Thank you.

Respectfully Submitted,

Trevor Lewis, MD  
President, Executive Medical Staff

# John H. Stroger, Jr. Hospital of Cook County



**TO:** Quality and Patient Safety Committee

**FROM:** Trevor Lewis, MD  
EMS President

**SUBJECT:** Medical Staff Appointments and Other Business Recommended by the **Executive Medical Staff Committee**.

Medical Staff Appointments/Reappointments Effective October 18, 2019 Subject to Approval by the CCH Quality and Patient Safety Committee Board.

## Initial Physician Appointment Applications:

Name	Category	Department / Division	Appointment Term
Awati, Neha, MD	Active	Medicine/General Medicine	October 18, 2019 through October 17, 2021
Dihu, Jamil B., DO	Active	Medicine/Cardiology	October 18, 2019 through October 17, 2021
Johnson, Nicole MD	Active	Pediatrics/ Child Abuse	October 18, 2019 through October 17, 2021
Khokar, Amna M., MD	Voluntary	Surgery/General Surgery	October 18, 2019 through October 17, 2021
Murray, David T., MD	Active	Emergency Medicine	October 18, 2019 through October 17, 2021
Thompson, Sherece, B., DDS	Voluntary	Oral Health	October 18, 2019 through October 17, 2021
Wohrley, Julie MD	Voluntary	Pediatrics/Infectious Diseases	October 18, 2019 through October 17, 2021

CCHHS

**APPROVED**

BY THE QUALITY AND PATIENT SAFETY COMMITTEE  
ON OCTOBER 18, 2019

**Reappointment Applications Physicians:****Department of Anesthesiology:**

<b>Name</b>	<b>Category</b>	<b>Division</b>	<b>Reappointment Term</b>
Bang, Jason B., MD	Active	Anesthesiology	January 19, 2020 through January 18, 2022
Ghaly, Ramsis MD	Active	Anesthesiology	December 18, 2019 through December 17, 2021
Gwam, Chike MD	Active	Peds Anesthesiology	December 8, 2019 through December 7, 2021
Jelev, Tanyu J., MD	Active	Anesthesiology	February 21, 2020 through February 20, 2022
Nasr, Ned MD	Active	Anesthesiology	December 21, 2019 through December 20, 2021

**Department of Emergency Medicine:**

<b>Name</b>	<b>Category</b>	<b>Division</b>	<b>Reappointment Term</b>
Nasr, Isam F., MD	Voluntary	Emergency Medicine	February 21, 2020 through February 20, 2022
Palivos, Lisa R., MD	Active	Emergency Medicine	February 21, 2020 through February 20, 2022
Schneider, Jeffrey J., MD	Voluntary	Emergency Medicine	February 21, 2020 through February 20, 2022

**Department of Family Medicine:**

<b>Name</b>	<b>Category</b>	<b>Division</b>	<b>Reappointment Term</b>
Ogale, Manisha MD	Active		October 19, 2019 through October 18, 2021
Xu, Hanna MD	Active		December 8, 2019 through December 7, 2021

**CCHHS****APPROVED****BY THE QUALITY AND PATIENT SAFETY COMMITTEE  
ON OCTOBER 18, 2019**

**Department of Medicine**

Name	Category	Division	Reappointment Term
Adegunsoye, Adekonla, MD	Active	General Medicine	December 8, 2019 through December 7, 2021
Amarah, Amatur, R. MD	Active	Nephrology	December 8, 2019 through December 7, 2021
Huang, Henry, MD	Voluntary	Cardiology	October 18, 2019 through October 17, 2021
Christians, Melody, MD	Active	General Medicine	October 28, 2019 through October 27, 2020
Rosen, Fred, MD	Active	Hematology/Oncology	December 16, 2019 through December 15, 2021
Singh, Anshu, MD	Active	Hospital Medicine	December 11, 2019 through December 10, 2021
Suboc, Tisha, MD	Voluntary	Cardiology	December 8, 2019 through December 7, 2021

**Department of Oral Health:**

Name	Category	Division	Reappointment Term	Discussion	Recommendation
Watson, Melanie, DDS	Active	Oral Health	December 16, 2019 through December 15, 2021		Recommended

**Department of Pediatrics:**

Name	Category	Division	Reappointment Term
Sharma, Shipra DO	Active		December 8, 2019 through December 7, 2021

**Department of Surgery:**

Name	Category	Division	Reappointment Term
Lamberti, Paul M., MD	Active	Orthopedic	January 19, 2020 through January 18, 2022
Wysocki, Robert W., MD	Active	Orthopedic	January 19, 2020 through January 18, 2022

**Department of Trauma:**

Name	Category	Division	Reappointment Term
Roach, Paul M., MD	Voluntary	Trauma	December 11, 2019 through December 10, 2021

CCHHS

**APPROVED**

BY THE QUALITY AND PATIENT SAFETY COMMITTEE  
ON OCTOBER 18, 2019



**Initial Application for Non-Medical Staff:**


Name	Category	Department/ Division	Appointment Term
Curan, Megan E., PA-C	Physician Assistant	Surgery/Vascular	October 18, 2019 through October 17, 2021
Nwabudike, Sinchieze PA-C	Physician Assistant	OB/Gyn	October 18, 2019 through October 17, 2021

**Renewal of Privileges for Non-Medical Staff:**

Name	Category	Department/ Division	Appointment Term
Cartwright, Mark A., CRNA	Nurse Anesthetist	Anesthesiology/Trauma	January 19, 2020 through January 18, 2022
Trammell, Glen PA-C	Physician Assistant	Correctional Health/Med Surg	December 16, 2019 through December 15, 2021
Simmons, Zina CNP	Nurse Practitioner	Medicine/General Medicine	December 8, 2019 through December 7, 2021
Quezada-Gomez, Carlos PsyD	Clinical Psychologist	Correctional Health/Psychiatry	October 21, 2019 through October 20, 2021

**Non-Medical Staff Request for Agreement Changes/Additional Privileges:**

Name	Department/ Division	Additional Privileges	Recommendation
Maliejus, Kristina, PA-C	Surgery/Cardiothoracic	Prescriptive Authority	Recommended
Posey, Sarah, PA-C	Medicine/Cardiology	Prescriptive Authority	Recommended
Szpur, Mary, PA-C	Medicine/Infectious Disease	DEA-X Waiver	Recommended

  
**CCHHS**  
**APPROVED**  
**BY THE QUALITY AND PATIENT SAFETY COMMITTEE**  
**ON OCTOBER 18, 2019**



Toni Preckwinkle  
President, Cook County Board of Commissioners  
John Jay Shannon, MD  
Chief Executive Officer, Cook County Health

Deborah Santana  
CCH Secretary to the Board  
1950 W. Polk Street, Room 9106  
Chicago, IL 60612

October 4, 2019

Dear Members of the Quality and Patient Safety Committee:

Please be advised that at the Provident Hospital Medical Executive Committee Meeting held on October 4, 2019 the Medical Executive Committee recommended the actions on the enclosed list. It is being presented to you for your consideration.

Respectfully,

Valerie Hansbrough, MD  
Provident Hospital of Cook County  
President, Medical Staff  
Chair, Medical Executive Committee

# Provident Hospital of Cook County



**TO:** Quality and Patient Safety Committee

**FROM:** Valerie Hansbrough, MD  
President, Medical Executive Committee

**SUBJECT:** Medical Staff Appointments and Other Business Recommended by the **Medical Executive Committee**  
on 10/4/2019

Medical Staff Appointments/Reappointments Effective October 18, 2019 Subject to Approval by the CCH Quality and Patient Safety Committee.  
**New Business**

## Initial Physician Appointment Application:

Name	Category	Department / Specialty	Appointment Term
Awati, Neha, MD	Affiliate	Internal Medicine	October 18, 2019 thru October 17, 2021
Dihu, Jamil, B., DO	Affiliate	Internal Medicine/Cardiology	October 18, 2019 thru October 17, 2021
Chennuri, Rohini, MD	Affiliate	Pathology	October 18, 2019 thru October 17, 2021
Emuchay, Ngozi, MD	Affiliate	Internal Medicine	October 18, 2019 thru October 17, 2021
Mihailescu, Dan, MD	Affiliate	Internal Medicine/Endocrinology	October 18, 2019 thru October 17, 2021
Patel, Dipika, MD	Active	Pediatrics/Allergy/Immunology	October 18, 2019 thru October 17, 2021
Rajagopal, Nimmi, MD	Affiliate	Family Medicine	October 18, 2019 thru October 17, 2021

## New Business

## Reappointment Applications Physicians:

### Department of Anesthesiology:

Name	Category	Department/Specialty	Appointment Term
Bang, Jason B., MD	Affiliate	Anesthesiology	March 23, 2020 thru January 19, 2022
Gwan, Chike, MD	Affiliate	Anesthesiology	December 8, 2019 thru December 7, 2021

### Department of Emergency Medicine:

Name	Category	Department/Specialty	Appointment Term
Lynch, Linda, DO	Active	Emergency Medicine	October 20, 2019 thru October 19, 2021

CCHHS

**APPROVED**

BY THE QUALITY AND PATIENT SAFETY COMMITTEE  
ON OCTOBER 18, 2019

**Department of Internal Medicine:**

Name	Category	Department/Specialty	Appointment Term
Adegunsoye, Adekonai, MD	Affiliate	Internal Medicine	December 8, 2019 thru December 7, 2021
Badri, Sheila, MD	Affiliate	Infectious Disease	December 8, 2019 thru December 7, 2021
Fogelfeld, Leon, MD	Affiliate	Endocrinology	December 8, 2019 thru December 7, 2021
French, Audrey, MD	Affiliate	Infectious Disease	December 8, 2019 thru December 7, 2021
Jain, Neha, MD	Affiliate	Pulmonary	November 10, 2019 thru November 9, 2021
Kotwal, Vikram, MD	Affiliate	Internal Medicine	December 8, 2019 thru December 7, 2021
Riles, Williams, MD	Affiliate	Gastroenterology	December 8, 2019 thru December 7, 2021
Singleton, Lafayette, MD	Affiliate	Neurology	October 18, 2019 thru October 17, 2021

**Department of Pediatrics:**

Name	Category	Department/Specialty	Appointment Term
Moy, James, MD	Voluntary	Allergy/Immunology	October 21, 2019 thru October 20, 2021

**Department of Radiology:**

Name	Category	Department/Specialty	Appointment Term
Javier, Calvin, MD	Active	Radiology	October 18, 2019 thru October 17, 2021

**Department of Surgery:**

Name	Category	Department/Specialty	Appointment Term
Godsel, Mark, DPM	Affiliate	Podiatry	October 28, 2019 thru October 27, 2020
Lamberti, Paul, M., MD	Affiliate	Orthopedic	January 19, 2020 thru January 18, 2022
LaVeau, Robert, DPM	Affiliate	Podiatry	November 16, 2019 thru November 15, 2020

**Initial Application for Non-Medical Staff:**

Name	Category	Department/Specialty	Appointment Term
Dupiton, Sabine, D., PA-C	Physician Assistant	Internal Medicine/Gastroenterology	October 18, 2019 thru October 17, 2021

CCHHS

**APPROVED**

**BY THE QUALITY AND PATIENT SAFETY COMMITTEE  
ON OCTOBER 18, 2019**

Shah, Palak, K., PA-C	Physician Assistant	Surgery/General Surgery	October 18, 2019 thru October 17, 2021
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**Medical Staff Category and / or Department Addition/Change With No Change In Privileges:**

Name	Department/ Division	From	To	Action
Mackiewicz, Kristine, U., MD	Surgery/General Surgery	Voluntary	Affiliate	Approved.

**Medical Staff Appointment Provisional To Full:**

Name	Department/ Division	Discussion	Recommendation
Adegunsoye, Adekonla	Internal Medicine	File reviewed and presented with no issues identified.	Approved.
Alonso, Vanessa, MD	Internal Medicine	File reviewed and presented with no issues identified.	Approved.
Babaran, Wesley, MD	Internal Medicine	File reviewed and presented with no issues identified.	Approved.
Dharia, Chiraag, MD	Radiology	File reviewed and presented with no issues identified.	Approved.
Muthuswamy, Kavitha, MD	Internal Medicine	File reviewed and presented with no issues identified.	Approved.
Narh, Raymond, MD	Internal Medicine	File reviewed and presented with no issues identified.	Approved.
Riles, William, MD	Internal Medicine	File reviewed and presented with no issues identified.	Approved.
Ripley, Melanie, MD	Internal Medicine	File reviewed and presented with no issues identified.	Approved.
Sharma, Shipra, DO	Pediatrics	File reviewed and presented with no issues identified.	Approved.

**Reapplication for Non-Physician Appointment:**

Name	Category	Department/Specialty	Appointment Term
Eneogwe, Joy C.P., CNP	Nurse Practitioner	Internal Medicine	December 11, 2019 thru December 10, 2021
Powell, Stephanie, PA-C	Physician Assistant	Internal Medicine	October 18, 2019 thru October 17, 2021

**Non-Medical Staff Request for Agreement Changes/Additional Privileges:**

Name	Department/ Division	Additional Privileges	Recommendation
Shah, Chandrika H., PA-C	Surgery/General Surgery	New Collaborative Agreement	Approved.
Onwueme, Bundo E., PA-C	Surgery/General Surgery	New Collaborative Agreement	Approved.

  
**APPROVED**  
**BY THE QUALITY AND PATIENT SAFETY COMMITTEE**  
**ON OCTOBER 18, 2019**